PROCEEDINGS OF THE BROWN COUNTY EXECUTIVE COMMITTEE

Pursuant to Section 18.94 Wis. Stats., a regular meeting of the **Brown County Executive Committee** was held on Monday, July 6, 2015 in Room 200 of the Northern Building, 305 E. Walnut Street, Green Bay, Wisconsin.

Present: Chair Tom Lund, Supervisors Patrick Moynihan, John Van Dyck, Patrick Evans, Bernie Erickson, Patrick Buckley and Steven Fewell

Also Present:

Troy Streckenbach (County Executive)
Chad Weininger (Director of Administration)
Dan Process (Internal Auditor)
Paul Zeller (Treasurer)

Warren Kraft (Director of Human Resources)
Erik Pritzl (Director of Human Services)
Cindy Van Asten (M3 Insurance Consultant)
Brian Lueth

I. Call meeting to order.

The meeting was called to order by Chair Tom Lund at 5:30pm.

II. Approve/modify agenda.

Motion made by Supervisor Moynihan, seconded by Supervisor Van Dyck to modify the agenda by moving Items 10 a, b & c following Item #5 and to enter into Closed Session for Items #13 and #14, not #12. Vote taken. MOTION CARRIED UNANIMOUSLY.

III. Approve/modify Minutes of June 8, 2015.

Motion made by Supervisor Moynihan, seconded by Supervisor Van Dyck to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

Comments from the Public None.

Vacant Budgeted Positions (Request to Fill)

- 1. Clerk of Courts Deputy Clerk of Courts I Vacated 7/13/15.
- 2. District Attorney Special Drug Task Attorney Vacated 7/2/15.
- 3. Human Services (CTC) Community Treatment Program Worker Vacated 8/3/15.
- 4. Human Services (CTC) TAD/CJCC Court Supervisor Vacated 6/24/15.
- 5. Public Works (Facilities Management) Housekeeper (.50) Vacated 7/15/15.

Motion made by Supervisor, seconded by Supervisor to suspend the rules to take Items 1-5 together. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

Motion made by Supervisor Moynihan, seconded by Supervisor Erickson to approve Items 1-5. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

Although shown in proper format, Item 10 was taken at this time. Supervisor Buckley arrived at 5:36 p.m. Supervisor Fewell arrived at 5:50 p.m.

Communications

6. Communication from Supervisor Van Dyck re: Consider a change in Board ordinances to require that support resolutions receive a favorable vote at both the home committee and Executive Committee before being committed to resolution. *Referred from May County Board*.

Van Dyck stated that in the last couple of months he had supported the various proposals that had been brought forward and he had no issue with the topic, however he just felt that in some cases, and it was a general feeling, that a lot of these resolutions probably didn't go very far when they got sent to Madison. They were spending a significant amount of time, particularly legal counsel, to go through and produce all these resolutions to then sit and debate them and then send them down there for seemingly little purpose. He felt they could distinguish between the ones that had direct county affect. Unlike talking about legalizing marijuana which was totally outside the realm of their responsibility. He just felt that having a second set of eyes on some of these before they were pushed through and they expend all the energy in creating them and sending them to the board would just be common sense or at least a secondary look at them before they expend the energy on them.

Erickson felt that overall Van Dyck had an okay idea but on some of these, and in reference to the one he submitted, if you would have gone to a home committee, Executive Committee and County Board that would have taken close to three months and they would probably have it this month at County Board to discuss and it was all over already. Sometimes urgency in the eyes of the supervisor dictates it and if you don't want to vote for it, don't vote for it, if you support it, support it. There were many times that he had not voted for things. He agreed that they were an arm of the state but he felt they had a right to make some suggestions periodically. He didn't see very many resolutions ever coming up that hadn't been passed through a committee, once in a while there was a little bit of urgency.

For clarification on urgency, Van Dyck questioned if it was really slowing anything down because if it came out of PD&T, couldn't it move to Executive and then to the County Board in one month. Lund responded that it could, and it did.

Evans felt that what they sent down there was important; they may or may not agree with it. It was up to the legislators who received it to do whatever they wanted to do with it. He was not a supporter of saying that they had to have a favorable vote both at the home and Executive Committee because the County Board, just like society, was made up of people that weren't always going to be supportive of everything. They had people that had different ideas and values. He never liked the idea of saying that if it was not unanimous it was not going anywhere, it was not appropriate and it was not how government democracy worked. They may or may not like the majority sometimes because they don't always get what they wanted but to say that they won't act on anything or make their voices heard as a county government unless it was unanimous, he couldn't support it and wouldn't support it today.

Buckley liked the idea however they may need to put some sort of criteria on what they would put in resolution form because it seemed like for a while they were putting together a resolution and sending it down to Madison for everything. This might be a start or it might just need to have some sort of other guidelines for resolutions.

Moynihan stated that if they don't get both entities essentially it could die and he was not agreeable to that. Lund responded that that was true if they had to have favorable votes at both the home committee and Executive Committee.

Van Dyck's intent was not to stop it; it was a matter of before it got put into resolution form that it would clear at least the two committees. That wouldn't preclude if it got turned down, it could still get pulled at the full board in which point the full board could vote on it and if enough agreed with it it could be put in resolution form and brought back. That was a delay in timing but it wouldn't preclude it from still going through.

Buckley felt they were trying to avoid people bringing stuff to the County Board at the last minute and not having proper time to review it.

Motion made by Supervisor Evans, seconded by Supervisor Erickson to receive and place on file. Vote taken. Ayes: Fewell, Moynihan, Lund, Erickson, Evans; Nays: Van Dyck, Buckley. <u>MOTION</u> CARRIED 5 to 2.

Legal Bills

7. Review and Possible Action on Legal Bills to be paid.

Motion made by Supervisor Moynihan, seconded by Supervisor Erickson to approve the Legal Bills. Vote taken. MOTION CARRIED UNANIMOUSLY.

Reports

- 8. County Executive Report.
 - a) Budget Status Financial Report for May, 2015.

Motion made by Supervisor Fewell, seconded by Supervisor Moynihan to receive and place on file. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

- 9. Internal Auditor Report.
 - a) Budget Status Financial Report for May, 2015.

Motion made by Supervisor Fewell, seconded by Supervisor Buckley to receive and place on file. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

b) Monthly Status Update: June 1 - June 30, 2015.

Motion made by Supervisor Erickson, seconded by Supervisor Moynihan to receive and place on file. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

- 10. Human Resources Report.
 - a) Approval of vacation for the Finance Director position.

Weininger informed that the candidate that they would like to extend the offer to had many years' experience as a formal Finance Director. He had taken a substantial salary decrease to come here as the Finance Director and with asking him to move from there to here he'll be taking another pretty large cut in vacation. He was asking for some leeway to allow three weeks. He had asked for four weeks and Weininger informed that the county doesn't give four. The most that department heads got was three to start. Weininger informed that if he starts now he won't get another increase until he had nine more years in which he may retire. The goal would be to try and make it as best as possible to have him come here. He didn't think the extra days of vacation would be a hardship to finance.

Motion made by Supervisor Van Dyck, seconded by Supervisor Buckley to approve. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

b) 2016 Insurance Proposals.

Human Resources Director Warren Kraft and M3 Insurance Consultant Cindy Van Asten provided documents (attached) re: 2016 Employee Benefit Recommendation – June 2015 and Onsite/Near Site Opportunity.

Van Asten provided updates on the changes that were made going into 2015. Going into this plan year, they made changes into Premium Designation, that's where they tiered out the providers between Tier 1 - United Healthcare and Tier 2 - United Healthcare Choice Plus. Employees would look to see who fell under Tier 1 or Tier 2 and their benefits would pay

differently based upon that. Out the gate early on understanding that the premier designation was a big change and how employees purchase and consume healthcare. They asked employees to engage differently and make a big change. So far this year that change had really done well and while there was some employee noise the first three months of the calendar year, there was significantly less employee calls and volume some of the months in 2014 and 2013. She pointed that out because while there were some new folks in the HR team that were dealing with some of those calls, they didn't have some history on the previous years to understand some of the employee concerns. The utilization into the Premier Designation had been about 36.5%. So that had really been performing within the plan. They changed the emergency room co-pay, they increased that and they had a waived if there was a true emergency. They had not enough data the first five months of the year as June just closed out to really see the true impact to some of these changes. They made some changes in to the urgent care and then they tiered out the office visits from a \$15 copay and a \$25 copay depending again on the Tier 1 and Tier 2. There was a Wellness Committee that was formed and up and meeting to get acquainted with how well functioning wellness team worked and working to build strategies for the short term and long term as they look to integrate wellness. The Personal Health Assessments last year, they had determined to move to the outcome base with the outcome of the health risk assessment would be tethered to the contribution and to the health reimbursement account. There was an increase in member participation last year over the prior year by 26%. With that, it moved the overall aggregate score up four points. Heath Risk Assessments get a score to the county and their health overall, it was a 0 to 100 scoring. Moving up four points was pretty significant, meaning employees absolutely engaged in the process and got involved in the Health Risk Assessment and understanding where their health risks were at. With that, they implemented Reasonable Alternative Standards. Any members who got a score less than a Gold Standard had the opportunity to participate in some additional coaching or opportunity within wellness to move their score. There were 163 members who participated in those reasonable alternative standards and 90 of them with completion. That was significant participation when compared to other plans in the general area, even compared to Bellin's plan that had been on an outcome base for a few years.

Referring to the On-site / Near Site sheet, Van Asten informed that this had been in the works for a couple years where Supervisor Erickson had brought up an on-site clinic. While they worked to evaluate and research the value of an on-site clinic and looking where all the employees were within the county, they found that an on-site/one place wouldn't really fit the need so they went out to Prevea, Bellin and Aurora and asked them to provide proposals on a near site clinic. This offer was being recommended to do as a pilot and to offer it to full-time benefit eligible employees at no costs to them. That would pull these services out of the health plan and allow members to go in at their convenience at whatever site might be available. Bellin had the ability to track some data for them so they could see the time, the hours of the day, the days of the week and which locations was their best traffic. They did not do a formal RFP and were recommending it as a pilot to understand the need. The City of Green Bay rolled out the Bellin Fast-Care within the guides of their health plan for January. She brought it up because the City of Green Bay was looking to do a formal RFP after their pilot for these services and there could be opportunity for them to be within their volume in that RFP in the future.

Responding to questions from Van Dyck, Van Asten informed that the recommendation was Bellin effective September 1st for Brown County employees. While Aurora was slightly less money, Bellin included some lab services that would also be included. If an employee chose to go to Aurora, there would be a \$10 copay and Prevea would go under Urgent Care and there would be a \$25 copay. Van Dyck questioned if they were comfortable with the fact that just the avoidance of \$10, it would move people into that option. It didn't seem to him to be enough of an incentive that if they were going to offer the Bellin and they were going to try that, to him they should be looking at upping the copay to try and push people into that direction. Van Asten believed that the \$10 would do it was because with the population, there was a fairly male

dominate population and they needed to get to the consumers of healthcare which was predominantly female and she felt if they did a good educational spinout and communicate it, she believed people would go for a \$0 no cost option. The hours were extended there. What they needed to educate the people on was the right place at the right cost at the right time.

Erickson questioned how they determined Tier 1 and Tier 2, Van Asten responded that they were determined by United Healthcare Choice Plus and a formulary that they use. So for a provider to be in a Tier 1 under United Healthcare they had to make some quality measures. Some of the quality measures were very similar to the quality measures that were used through the Center for Medicare Services (CMS) in determining the reimbursement schedule that they used for the Pioneer which is where provider delivery systems would take risk and they get paid on that. So it used 18 different measures. It was on the reimbursement and in the contract with United Healthcare that they have with the provider systems. She knew that the Tier 1 providers were thought to have better quality outcomes and that the point of being sick to full lifestyle at the end of the day was less costly the Tier 1 provider. She felt some of the confusion came in was when people would have to look up by provider on the website as not all providers within a practice group were necessarily in or not Tier 1.

Motion made by Supervisor Erickson, seconded by Supervisor Evans to approve 10b with Bellin (Fast Care-Shopko) as the on-site/near site clinic.

Evans questioned if they could amend the proposal. Van Asten responded that they could amend the insurance plan if the near-site option went through for September 1st. They could amend the health plan to change the copay to \$15 from \$10 for retail setting, which would match what they currently had in place for their Tier 1 providers. The offsetting benefit was that people would go in earlier and they would recognize what could be handled in that acute care setting verses going in to full primary care. Evans understood that, but if they were increasing the copay, did that reduce the county's costs at all; he couldn't see that being a massive savings for the county, he felt they put more burden on the employee then. Van Asten felt the thought was that it would put more consideration in using the Bellin near site clinic. She reiterated that they were getting some pretty straight forward reports out of Bellin for them to manage that information differently. They would potentially think differently about \$10 verses \$15.

Buckley felt they could start with \$15, the idea was that if they were going to put this into play they should get employees to utilize it. Van Asten responded that it was the point of the pilot, how this will work and how to get people there. They could ultimately at some point decide that a retail setting was going to fall under regular primary care visit and remove retail out of the plan altogether if this was successful at guiding employees into this near site opportunity. The pilot was to figure this out.

A motion by substitution was made by Supervisor Van Dyck, seconded by Supervisor Buckley to approve 10b with Bellin (Fast Care-Shopko) as the onsite/near site clinic and to increase the copay from \$10 to \$15 per visit for the retail setting services. Vote taken. Ayes: Fewell, Van Dyck, Buckley, Lund, Erickson, Moynihan; Nays: Evans, Moynihan. MOTION CARRIED 5 to 2, 6 to 1.

Referring to the 2016 Employee Benefit Recommendation handout Van Asten informed that there were no recommendations to change the deductible. In January 2014 the \$2,000 single/\$4,000 family was put into place, they were recommending that that stay the same. In 2015 the Health Reimbursement Account was \$1,050 for single/\$2,100 family. The recommendation was to move that to \$750/\$1,500 however this was brought through to the Administration Committee last week and the committee recommended \$850 single/\$1,600 family. Back in 2009 when the high deductible plan was put in place going into 2010 it was prior to Act 10 and when this plan went into place, they had talked about a three year strategy in which to move the health reimbursement account down through the course of several years where the health reimbursement dollars would not continually

just roll over if they weren't used but the health reimbursement dollars would be there to capture anybody who had the exposure above and beyond their first part of that deductible and there were incentive dollars they could earn through different wellness activities. Those incentive dollars that were earned would rollover year after year. They were looking to get the HRA at \$850 single/\$1,600 family. The rollover dollars that a person could rollover year after year would be the unused dollars that they didn't use with an HRA but would not exceed the \$2,000 exposure or the \$4,000 family exposure. But the dollars that were earned in the incentive would continue to rollover and those incentive dollars are what could also continue to be used within the whole realm of the 213d, similar to a flexible spending account. What happened was, initially they wanted to help people build up their HRA dollars so for people who went in and didn't use the HRA dollars they let them keep them and roll them over. What they were saying now was they would have the health reimbursement dollars if they had that exposure but they would not continue to roll them over to be used just like the flexible spending. So they were offering the protection there and they were going to allow members to roll unused dollars to the maximum exposure they had with the deductible and the dollars that continue to rollover that can be used as Section 125 were the wellness earned dollars. This was a way to get back and be able to manage the fund that they were being taken out of which really never was the initial intent to keep providing the unused dollars. For a variety of reasons that at the time made sense because of the changes they did.

Fewell explained that the rationale from Administration Committee was they felt like when you look at the 1% increases that they had in salary that when they jump, it would be a \$300 difference and that was a significant jump. Instead of going all the way down they looked at going to the \$850 as opposed to going to \$750. But they also realized that the dollars that could rollover and continue to add were those wellness dollars so they increased the wellness dollars because they felt it would encourage employees to do some of the healthy things they should be doing.

Van Asten informed that they were not recommending any changes to the coinsurance or the premium designation program. They were not recommending any changes to the pharmacy or the maximum out of pocket. When they got to the premium contribution last year the recommendation was to move to outcome base and have the outcome of the personal health assessments tiered and tethered to the premium. The decision was made that they would have a premium contribution based on taking the health risk assessment or not and they would tether the outcome to the funding of the Health Reimbursement Account. They did that in an effort to allow employees another year to understand a personal health assessment and to engage and prepare for the differential to their premium. The Healthcare Reform Law stated that you can have 30% from Gold to Standard and an additional 20% for tobacco. The recommendation here was the 30% spread overall, 12% Gold, and 42% Tobacco/Abstain. The reason that not taking the PHA or Tobacco are at the same, if someone fell in the tobacco category they have the opportunity to participate in the reasonable alternative standard and earn back those points.

They are recommending no changes to the Dental Plan or to the additional offering of Dental Associates.

There was a carrier change going into 2014 for Short Term Disability, they were not recommending any carrier change. They were recommending that the wage change from 60% reimbursement to 50% reimbursement. This was being recommended based in part to how that plan was performing. It was a totally self-funded plan and The Standard provided third party recommendation.

Long Term Disability, they are recommending no change.

They were recommending continuing the voluntary programs that were in place for vision, accident and critical illness.

The Retiree Options, retirees were currently running at 156% loss ratio verses actives. For the past

three years the retirees had run well over 140%. What they had seen happen at some other municipalities, even within the City of Green Bay, several years ago, they had looked to increase the retiree rates to try to get the retiree rates and differential between their premiums to more closely look at their actual utilization of the plan. That would be a big leap all at one time so the recommendation was to increase the retiree rates at an amount of 8.7% above and beyond whatever the active rate was in a given year over the course of the next five years.

Erickson questioned if the retirees fell into the Gold, Silver, Bronze categories? Van Asten informed that retirees currently did not participate in the HRA and they pay their premium dollars but the portion they pay was far less than the utilization. What they would find today was there were different options, oftentimes retirees' marketplace was there with the change of reform so it was easier to get individual insurance, more and more will find their own insurance.

They had 62 retirees on the program, under the age of 65. There were 1,386 employees on the plan.

Kraft informed that this proposal would not impact their protective services they were governed by union contracts so they would have to go back and talk to them. This was affecting non-protective service. What was proposed in the budget was that they would offer a plan that was at least as good as the high deductible state plan, which was a richer plan than what they currently had. Van Asten informed that the high deductible plan through the state was a health savings account and all of those plans today were offered through an HMO, they were working to understand the options with the state plan and how it compared and what that meant to the county.

Van Dyck believed Supervisor Kaster had placed a communication that needed to be readdressed with regard to eliminating retirees from using the benefits. Fewell informed that Admin Committee was unsure what Kaster was asking for but if he was looking to cut retirees off from health benefits immediately, that was unacceptable.

Van Asten informed that they were offering two educational series twice a year with ADRC to educate retirees to what their options were as it related to Medicare, supplements, Advantage Plans and the open market.

For the ones banking their sick days for their insurance, Buckley questioned if they were allowed to get insurance outside of the county and utilize sick days for that. Van Asten responded that those dollars only went towards this plan. Weininger informed that HR's interpretation of ACA along with the consultants was, if they gave people dollars to go outside that would be a violation. Right now employees were picking up the retirees share because they were at about 103% where the employees were at about 98% of what the claims were coming in. So the general thought was that if you stepped it up over a period of time they will find out, especially for single and dependent on income, it was probably cheaper to go out into that private market. So M3 would work with retirees to help make that determination and provide knowledge so they can become better consumers. He felt that as soon you start seeing the county step up those payments, probably for a number of them, it would be a more prudent choice to go outside our plan, so this got to what Kaster was looking at. Buckley felt that instead of trying to penalize them to get them out of the system why not incentivize them along with the educational part. Weininger responded that if they were looking at the police officers, that was something they could possibly look at negotiating with them. So their retirees could use that money because all the other employees didn't have that bank of sick leave. Weininger felt their goal was to try and keep everyone's premium down by making the adjustments and making the adjustments and make it more affordable. Realistically the majority of the people that were going to use this were protective service because most of the regular employees that were general service will have to work a longer period of time. Fewell explained that this was the reason he pushed HR to move more towards an HSA verses an HRA on the employee side, then employees would be able to save, put their own money in and have money available to them to purchase their own health insurance when they get to that point. It was one way they could create some equity.

Motion made by Supervisor Erickson, seconded by Supervisor Fewell to approve the redline copy. Vote taken. Nay: Moynihan. MOTION CARRIED 6 to 1.

c) Fast Care Proposal.

Moynihan informed that if they took the motion in proper order he would have voted yes to the above motion and asked the committee to allow him to change his nay to an aye.

Motion made by Supervisor Buckley, seconded by Supervisor Erickson to allow Moynihan to reconsider his vote on Item 10c. Vote taken. MOTION CARRIED UNANIMOUSLY.

Resolutions, Ordinances

11. Resolution re: Change in Table of Organization for the Airport Maintenance Mechanic.

Weininger informed that the airport had some aging buildings out there and they felt it would be valuable to have a Maintenance Mechanic verses a Groundskeeper. They were shifting their resources to take care of their aging facilities.

Motion made by Supervisor Fewell, seconded by Supervisor Erickson to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

Closed Session

- 12. ACTION Review and approval or rejection of high bids for tax deed properties: (high bid information of July 3rd to be distributed at meeting)
 - a. Parcel 2-762 at 1051 St. Paul St. Green Bay Minimum Starting Bid \$ 11,000.

Motion made by Supervisor Buckley, seconded by Supervisor Erickson to accept the Growth Process LLC, Virginia Haskins at the high bid of \$35,153. Vote taken. <u>MOTION CARRIED</u> UNANIMOUSLY.

b. Parcel 17-880 at 445 S. Baird St. Green Bay – Minimum Starting Bid \$ 5,500.

Treasurer Zeller informed that there was a lot of interest and phone calls on this during the time that it was up for sale. This property was completely gutted down to the studs. It was savable and had a new roof. The fact that it had a raze or repair order may have scared some folks off. He believed it was a saleable property, the minimum opening bid was \$5,500, their costs general taxes due alone exceed \$6,000 altogether with interest and penalties, there was \$9,000 owed to the county. He was asking that they allow him to put this back out for bid with a minimum bid of \$100 with hopes that some interested parties would start bidding on this. He will then bring it to the August Executive Committee.

Motion made by Supervisor Van Dyck, seconded by Supervisor Moynihan to approve the request to put the parcel back out for bid at a starting bid of \$100. Vote taken. <u>MOTION CARRIED</u> UNANIMOUSLY.

Motion made by Supervisor Moynihan, seconded by Supervisor Evans to enter into closed session. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

- 13. Update on status of Parcel 14-1048 (1163 Chicago Street, City of Green Bay) from June Executive Committee meeting No Action Required.
- 14. Closed Session to Deliberate the sale of Brown County owned Parcels to a Brown County Municipality or an adjacent property owner:

Parcel VH-590-6

Parcel 21-1331-1

Parcel B-99

Parcel PI-207-5

Parcel 14-411

Parcel 18-522 w/ 18-523

Parcel 21-293-1

Parcel 6-403

Parcel 7-326

Under State Statute <u>19.85(1)(e)</u> (e) Deliberating or negotiating the purchasing of public properties, the investing of public funds, or conducting other specified public business, whenever competitive or bargaining reasons require a closed session.

15. Reconvene into open session for the purpose of taking action on above Parcels.

Motion made by Supervisor Evans, seconded by Supervisor Buckley to return to regular order of business. Vote taken. MOTION CARRIED UNANIMOUSLY.

Motion made by Supervisor Buckley, seconded by Supervisor Fewell to accept the \$1,000 offer from the Village of Howard for Parcel VH-590-6. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

Other

- 16. Such other matters as authorized by law. None.
- 17. Adjourn.

Motion made by Supervisor Evans, seconded by Supervisor Erickson to adjourn at 7:12 p.m. Vote taken. <u>MOTION CARRIED UNANIMOUSLY.</u>

Respectfully submitted,

Alicia A. Loehlein Recording Secretary



Brown County

2016 Employee Benefit Recommendation June 2015

2016 Plan Renewal

Benefit	2015 Current Plan	2016 Proposed
Health Plan Deductible (in-network)	\$2,000 Single /\$4,000 Family	\$2,000 Single /\$4,000 Family
Health Reimbursement Account (HRA)	\$1,050 Single /\$ 2,100 Family (Maximum based on personal health assessment - PHA)	\$ 750 Single / \$1,500 Family \$850/Single / \$1,600 Family Roll over not to exceed deductible Dollars used on deductible/copay VEBA eliminated
Wellness Incentive Dollars – Earned into HRA	\$200 Single / \$400 Family	\$200 Single / \$400 Family \$250 Single / \$500 Family Dollars roll over year after year Used within section 125
Coinsurance	Premium Designation Program Tier 1 providers 90% Tier 2 providers 80%	Same as 2015
Pharmacy	20%/25%/35% Generic/Brand/Non-formulary Maximum \$1500/\$3,000	Same as 2015
Max out of Pocket	\$4,000 Single/ \$8,000 Family	Same as 2015
Premium Contribution	12% with PHA \$ 62.32 Single \$165.84 Family 17% without \$ 88.28 Single \$234.96 Family	Tied to outcome of PHA score 12% Gold 15% Silver 18% Bronze 32% Standard 42% Tobacco/Abstain
Personal Health Assessment	5% premium differential for	See above
Voluntary	participation	Premium Contribution tied to
Outcome based for HRA funds	Single / Family Gold \$1,050 /\$2,100 Silver \$ 840 / \$1,680 Bronze \$ 630 / \$1,260 Standard \$ 420 / \$ 840 Tobacco \$ 210 / \$ 420 Non Participant \$ 630 / \$1,260	outcome of PHA score
Dental Plan	Self Funded Plan offering Delta Dental \$0 Deductible \$1,250 annual Plan maximum Dual choice offerings Dental Associates Plan \$0 deductible	Same as 2015



Brown County

2016 Employee Benefit Recommendation June 2015

2016 Plan Renewal

Benefit	2015 Current Plan	2016 Proposed
Health Plan Deductible (in-network)	\$2,000 Single /\$4,000 Family	\$2,000 Single /\$4,000 Family
Health Reimbursement Account (HRA)	\$1,050 Single /\$ 2,100 Family	\$ 750 Single / \$1,500 Family
	(Maximum based on personal health	\$850/Single / \$1,600 Family
	assessment - PHA)	Roll over not to exceed deductible
		Dollars used on deductible/copay
		VEBA eliminated
Wellness Incentive Dollars – Earned	\$200 Single / \$400 Family	\$200 Single / \$400 Family
into HRA		\$250 Single / \$500 Family
		Dollars roll over year after year
		Used within section 125
Coinsurance	Premium Designation Program	Same as 2015
	Tier 1 providers 90%	
	Tier 2 providers 80%	
Pharmacy	20%/25%/35%	Same as 2015
	Generic/Brand/Non-formulary	
	Maximum \$1500/\$3,000	
Max out of Pocket	\$4,000 Single/ \$8,000 Family	Same as 2015
Premium Contribution	12% with PHA	Tied to outcome of PHA score
	\$ 62.32 Single	12% Gold
	\$165.84 Family	15% Silver
	·	18% Bronze
	17% without	32% Standard
	\$ 88.28 Single	42% Tobacco/Abstain
	\$234.96 Family	,
Personal Health Assessment	5% premium differential for	See above
Voluntary	participation	Premium Contribution tied to
	Single / Family	outcome of PHA score
Outcome based for HRA funds	Gold \$1,050 /\$2,100	
	Silver \$ 840 / \$1,680	
	Bronze \$ 630 / \$1,260	
	Standard \$ 420 / \$ 840	
	Tobacco \$ 210 / \$ 420	
	Non Participant \$ 630 / \$1,260	
Dental Plan	Self Funded Plan offering	Same as 2015
	Delta Dental	
	\$0 Deductible	
	\$1,250 annual Plan maximum	
	Dual choice offerings	
	Dental Associates Plan	
	\$0 deductible	



Prevea

Brown County

Saturday & Sunday

8 AM - 4 PM (Ash/She)

Ashwaubenon Health

8 AM - 4 PM

Holidays

Location

Howard Washington St. Oconto/Oconto Falls

Plymouth Sheboygan Pulaski (spring 2015)

East De Pere

East Mason St

June 2015

Aurora (Quick Care - Wal-

Proposal		Mart)
Services Offered	Services Offered	Services offered
Services Offered Animal/insect bites Cold and flu symptoms Cuts without bleeding Earaches Mild/mod asthma Minor infections Rashes and burns Severe sore throat Sprains and minor broken bones Sinus infections Urinary tract infections Additional services as needed	Services Offered Allergies (6 years & older) Athlete's foot Bladder infections (females, 12 yrs. & older) Bronchitis Camp physicals Cold & flu symptoms Cold sores Ear infections Impetigo Insect Bites Laryngitis Minor burns and rashes Minor sunburn Mononucleosis Pharyngitis Poison ivy (3 yrs. & older) Ring worm	Services offered Bronchitis Diarrhea Ear Infection Female bladder Infection Influenza Insect Stings Minor Low Back Pain Minor Rashes Mononucleosis Motion Sickness Nausea/Vomiting Pink Eye Poison Ivy Ringworm Seasonal Allergies Sinus Infection
Lab and X Ray available at all sites Subject to insurance billing	 Sinus infections (5 yrs. & older) Sore throat Sports physicals Swimmer's ear Upper respiratory infections Lab Services included:	Wart Removal
 MRI Ashwaubenon locations and Hospital 	Urinalysis Monospot Pregnancy Rapid Strep TB Skin Test	Lab Services Subject to Additional Fee insurance billing
Annual Costs	Annual Costs	Annual Costs
\$79.95 per visit	(Sliding scale not to exceed) \$26,715	
Hours	Hours	\$ 25,75
Monday – Friday		Hours
	M-F 8:30 AM – 8:30 PM	M - F 9 AM - 6:30 PM
8 AM – 8 PM	Sat 8:30 AM – 5 PM	Sat 9 AM – 2:30 PM
Saturday & Sunday	C 40 ANA E DA4	II a

Sun 10 AM - 5 PM

10 AM - 2 PM

Suamico - Shopko

Bay Park Square – Shopko

East Town Mall - Shopko

Location

Open holidays, except Christmas

On-site / Near Site Opportunity

Bellin (Fast Care - Shopko)

Sun vary by location

De Pere – Wal-Mart

Green Bay / Mason St - Wal-Mart

All Aurora foot print outside of area

Location



202 W. Front Street – PO Box 113 Mount Horeb, WI 53572 608-437-2001 Sellers Permit/Tax ID: 456-0000033384-03

FEIN: 39-1982769

Invoice #150703-56426-48 07/03/2015

GROWTH PROCESS LLC VIRGINIA HASKINS 2221 S Webster Ave Suite A #266 Green Bay WI 54301

Phone: 920-286-9696 920-437-5742

Email: gbkeyinvestments@gmail.com

--PAYMENT DEADLINE: 5pm on July 14, 2015 -- You will lose your bidding number if not paid on time --

Online Auction #15382-48 - Brown County, Wisconsin - Tax Delinquent Real Estate - You are a winning bidder. Please contact Wisconsin Surplus prior to the above payment deadline to make payment arrangements.

- 1. Payment Methods:
 - o Send guaranteed checks to Wisconsin Surplus, PO Box 113, Mount Horeb WI 53572.
 - o Wire Transfer Directions available upon request.
 - o Pay at our Office in Mount Horeb Via Cash, Guaranteed Check or Money Order
 - o Credit card, PayPal, Personal & Business Checks are NOT acceptable forms of payment no exceptions
- 2. General Contact: Brown County Treasurer's Office at (920) 448-4074 or BC_Treasurer@co.brown.wi.us
- 3. Deed Transfer Contact Brown County Treasurer's Office at (920) 448-4074 or BC_Treasurer@co.brown.wi.us
- 4. Deed Transfer: You must notify Brown County Treasurer's Office in writing (Fax, Email, Mail) as to who will be the owner of record for the property So Brown County Treasurer's Office can have the deed drafted properly. Please contact Brown County Treasurer's Office with any questions related to the deed transfer.
- 5. Note: Once payment is received Wisconsin Surplus will notify Buyer and Seller. After payment notification buyer is to contact Brown County Treasurer's Office and relay to them in written form any and all required deed transfer information. At which point all required information is received by Brown County Treasurer's Office they will begin the deed transfer process.

Bidder Item Qty Description

Tax Amount

0.08 35153.00

56426 2762 1

- House, Garage & Lot on St. Paul St. Green Bay WI
- Address: 1051 St. Paul Street, Green Bay, WI 54301
- County Map: Brown County GIS Mapping
- Land Records: Brown County Land Records
- Municipality: City of Green Bay
- Parcel ID: 2-762
- Opening Bid: 11000
- Acres: 4,634 sq ft
- Lot Dimensions: 50' x 93'
- Zoning: Residential -- Contact county and local zoning agency for exact zoning.
- Type of Access to Property: Off Public Roadway
- School District: Green Bay
- Structures On Property: Property is an improved lot with a single family dwelling. Assessment records indicate the house to be built in 1944; A 1-story with finished attic house; 680 sq.ft. on 1st floor with a finished attic. 1st floor = Bathroom, Kitchen, Living room & 2 bedrooms that share a common closet. Attic = 1 open bedroom. Full basement and a detached garage. Lot dimensions are 50' x 93'; Total of 4,634 sq. ft. per assessment records. Inspection of the property occurred June 3rd, 2015. The home appears to be structurally sound and salvageable. Roof is in need of new shingles and possibly a small leak exists in the ceiling of the living room above the front door. Utilities have been disconnected for an extended period of time. Walls, ceilings and flooring appear in reasonably good condition. Flooring upstairs and some flooring in the basement are individually laid tiles that may be suspect for asbestos. Two first floor bedrooms are wood floors in good repair. Most doors are quite nice including glass door knobs. Bathroom is in need of a lot of work. Kitchen cabinets appear to be original. Basement walls are block and have mortar separation in areas. There is a raze or repair order on the detached garage. The City of Green Bay has placed a Raze or Repair Order on the Detached Garage. New Owner MUST satisfy the Raze or the Repair of the garage to the satisfaction of the City of Green Bay within 30 Days of obtaining Quit Claim Deed to property!

- Property Vacant: Yes

- Property Clear of previous owner's personal property: Buyer is responsible for removal of any and all personal property, if any

- Legal Description: 0.106 AC M/L CADY & WARRENS SUBD OF PRT S OF N 2/5 OF PC 4 LOT 17 EX S 92 FT

- Title Type: Quit Claim Deed - Dead Transfer Fee: 30

- Title Transfer Terms: Deed will be issued upon payment in full.

- Clear Title: No abstract, title insurance, or survey will be provided by the seller. The winning bidder is responsible for recording fees, taxes, special assessments and special charges etc., if any — as provided in Wis Stat. 75.521(8), (Wisconsin Statutes 2009-2010). Bidders are encouraged to research title.

- Estimated Yearly Taxes: Buyer responsible for all future real estate taxes.

- Defects: The City of Green Bay has placed a Raze or Repair Order on the Detached Garage. New Owner MUST satisfy the Raze or the Repair of the garage to the satisfaction of the City of Green Bay within 30 Days of obtaining Quit Claim Deed to property!

- Overall Condition: Property is being sold "As Is". It is the bidder's responsibility to determine condition and any defects. Bidders are strongly encouraged to make personally inspection prior to bidding. Property is subject to all easements, right-of-way, and restrictions of record, if any. Brown County makes no representation or guarantee with respect to the use, condition, title, access or occupancy of the property. (Caution: Properties may be occupied and you may not be granted access by occupants)

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- County Contact: Brown County Treasurer's Office at (920) 448-4074 or BC Treasurer@co.brown.wi.us - 305 E Walnut St., Green Bay, WI 54301; Fax: (920) 448-6341

- Click on Photo or Item # for full Details

 Bid total:
 35153.00

 Premium:
 2812.24

 Sub-total:
 37965.24

 Total:
 37965.24

Balance Due: 37965.24

445 S Baird Street – City of Green Bay Parcel Number: 17-880

Description:

Property is an improved lot with a single family dwelling. Assessment records indicate the house to be built in 1888; A 1-story with partial attic; 1179 sq.ft. on 1st floor with a 356 sq. ft. attic over a portion of the home.

1st floor = No rooms. Totally gutted to studs Attic = was an upstairs apartment, no specific room count, plastered and paneling Full unfinished stone wall basement . Part dirt floor Corner lot . Approximately 3,798 sq. ft. in size

Narrative:

Inspection of the property occurred June 3rd, 2015.

House appears to be structurally sound. Had been used as a 2-family home. Can only be used as 1-family residence by new owner. All utilities had been disconnected for an extended period of time. House will need to be completely remodeled inside. Good thing is the first floor has already been gutted. One area of rotted floor was noticed on floor where perhaps the kitchen was. New shingles on roof approximately 8 years ago

City currently has a raze or repair order on the house.







Parcel No 17-880 Taken in Rem: April 24, 2015 After 90 day extension Date Municipality offered: Date Letter Sent to former owner: TAX YEAR GENERAL INTEREST & SPECIAL **INTEREST *** TAX PENALTY ASSESSMENT PENALTY 2014 1,510.90 75.55 473.81 23.69 2,083.95 2013 1,581.40 403.26 473.40 120.72 2,578.78 2012 1,584.40 689.22 411.79 179.13 2,864.54 2011 1,614.90 993.16 411.42 253.02 3,272.50 2010 SPECIALS NOT ON TAX ROLL **TOTALS** 6,291.60 2,161.19 1,770.42 576.56 10,799.77 Out of Pocket Charges In-Rem charges 204.00 Guardian Ad Litem **Total Charges** 204.00 **Total Charges & Taxes** 11,003.77